

REIMBURSEMENT ACROSS CANADA - 2016										
Component	British Columbia	Alberta	Saskatchewan	Manitoba	Ontario	Quebec	New Brunswick	Nova Scotia	PEI	Newfoundland & Labrador
Daytime Compression Garments	Yes*	Yes*	Yes*	Only for low-income*	Yes	Yes	Yes*	No	No	Only for low-income*
<i>Number and Frequency</i>	2 sleeves, gloves or gauntlets per lumpectomy mastectomy p/yr	3 over the counter or 2 custom sleeves/ stockings p/yr	2 daytime garments per limb every 6mo		6 garments per year	1 per affected limb p/yr 2 per child	1 per year			
<i>Financial Reimbursement</i>	Sleeves: 100% Gloves/gauntlets: \$150max off the shelf & \$300max custom	75% of benchmark price	100%		75% of total cost	75% up to a gov max	None, it is direct pay			
Nighttime Compression Garments	No	No	Yes	No	Yes*	No*	Yes*	No	No	Only for Low Income*
<i>Number and Frequency</i>			1 per limb every 2 years			Replaces the 1 daytime per year allotment	1			
<i>Financial Reimbursement</i>					75% of total cost	75% up to a gov max	It is direct pay to seller			
Compression Multi-layer bandaging	No	Yes (if patients go to AHS clinic, not for private clinics)	Yes	Conditional*	Conditional*	1 set of multi layer bandaging	Yes*	No	Yes	Conditional*
<i>Types of Bandaging Supplies</i>		Coban 2; tubigrig; stockinet; tapes; skin moisturizers and cleansers; disposable monofilaments; measuring tapes; scissors; wound care supplies	gel sheets, adhesives, stocking applicators, ulcer liners, and rubber gloves when used with compression garments			1 set of multilayer compression garments Also one accessory for garments	Short stretch bandage and foam/ cotton padding		All foams, comprilan, comprifoam, Coban, idealbinde, tape, cotton wrap	
<i>Financial Reimbursement</i>						75% up to a gov max				
Pneumatic Pumps	???	No	Conditional*	Conditional*	Conditional*	No	No	No	No	No
Manual Lymphatic Drainage	No	Yes (if needed and completed at AHS clinic)	Partial coverage*	Partial Coverage*	No	No	Yes*	No	Yes	Partial coverage*

Canadian Lymphedema Framework: Results from national survey to provincial associations (Updated March 2017)

***Conditions**

	Daytime Compression	Nighttime Compression	Bandaging Supplies	Pneumatic Pumps	MLD
British Columbia	Post mastectomy or lumpectomy patients only				
Alberta	Low income Albertans and those receiving income assistance are not required to cost share if they are receiving: Widows Pension, Assured Income for the Severely Handicapped or Alberta Works Health benefit. Albertans may not be eligible for AADL benefits if they are eligible to receive comparable benefits through another source including: Workers Compensation Board, Private Insurance, Veterans Affairs, Non-insured health benefits for First Nation People and Inuit. AADL is a cost-share program. Clients pay 25% of the approved benefit amount up to a maximum contribution of \$500 per individual (family) per benefit year.				Treat for two to three weeks when you first go to the clinic and then will do a follow up if need be. Usually seen once a year unless you have to go back due to a change in your limb
Saskatchewan	Some low compression isn't covered. Patients must have the garment requisitioned by an OT, PT, CDT therapist, ET, DNS or Wound care Nurse			Primary Patients Only only 1/health region or up to \$4000 (\$5000 for sequential) on approval through SAIL	Not all health regions have trained therapists. Amount of time allowed for LE patients varies from region to region.
Manitoba	Limited to those on the Employment and Income Assistance program (provincial welfare) with prescription and approval by the individual case worker assigned. EIA eligibility is very defined within provincial regulations		Coban is provided for clients of the Home Care program. Medical diagnostic criteria unclear (informally, mostly see related to venous insufficiency) Coban wrapping has recently been requested and approved for EIA clients (have seen minimal situations such as this to date)	Single chamber pumps are provided from the Home Care program for some patients.	Minimal coverage is provided. There are 2 therapists only for patients with upper extremity LE secondary for breast cancer. Most services are limited to the intensive phase but will do some minimal quarterly follow-up for the 1st year. There is also a 0.25 FTE therapist within a rural hospital setting. And there is a physiotherapist (not lymphedema certified) that works part time and focuses on an adult rehab population. Additional information is being sought related to any restrictions for this service.

Ontario		If edema cannot be managed effectively through nighttime bandaging	Bandaging supplies may be covered if the patient is seen by a professional health care provider (i.e. nurse or physiotherapist), who is visiting the patient under the auspices of "Home Care" and is covered by the Community Care Access program of Ontario (CCAC). The supplies ordered in this situation would only be covered for a short term while the patient is assessed as eligible for and receiving Home Care by the professional health care provider.	Primary Patients only	Very limited hospital funded lymphedema clinics offering MLD. Most offer group education classes and refer out to private therapists
Quebec	There is a government created chart of maximum allowed per certain garments	Choosing a nighttime compression garment replaces the 1 garment a year allotment for daytime compression There is a government created chart of maximum allowed per certain garments			
New Brunswick	Only for those on social services	Only for those on social services. Low income, greater than 20mmHg compression and with Dr's prescription	Only if treated in hospital or outpatient clinic, during intensive treatment only	Intensive phase if provided in hospital setting	
Nova Scotia					
PEI					
Newfoundland	Garments are only covered for patients on social assistance or those over the age of 65 who are receiving the guaranteed income supplement with their pension. All other patients do not qualify		Coban lite is covered under health pro nationally. If a patient is seeing a therapist employed by a healthcare board, this would be covered		If you are seeing a therapist employed by a health care board, you may receive some aspect of CDT, including MLD. The amount depends on the therapist's discretion. If your therapist is in private practices, it is not covered

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